

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000050963

FILED  
Jan 04, 2012  
Secretary of State

Entity Name: 1601 14TH STREET, NW LLC

## Current Principal Place of Business:

127 MONTE CARLO DRIVE  
PALM BEACH GARDENS, FL 33418 US

## New Principal Place of Business:

## Current Mailing Address:

9464 NEWBRIDGE DRIVE  
C/O NEWBRIDGE MNGT., LLC  
POTOMAC, MD 20854 US

## New Mailing Address:

FEI Number: 26-3783196      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JAFFE, PIRJO  
127 MONTE CARLO DRIVE  
PALM BEACH GARDENS, FL 33418 US

## Name and Address of New Registered Agent:

JAFFE, PIRJO L  
127 MONTE CARLO DRIVE  
PALM BEACH GARDENS, FL 33418 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PIRJO JAFFE

01/04/2012

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: JAFFE, PIRJO L  
Address: 127 MONTE CARLO DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: MGRM  
Name: JAFFE, DAVID E  
Address: 127 MONTE CARLO DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: MGRM  
Name: JAFFE, MICHELLE L  
Address: 9464 NEWBRIDGE DRIVE  
City-St-Zip: POTOMAC, MD 20854 US

Title: MGRM  
Name: PIRJO JAFFE REVOCABLE TRUST  
Address: 127 MONTE CARLO DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: MR  
Name: JAFFE, STEPHEN H  
Address: 127 MONTE CARLO DRIVE  
City-St-Zip: POTOMAC, MD 20854

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PIRJO JAFFE

MRS

01/04/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date